

PTO/SB/21 (09-04)

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U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

	Application Number	09/975,918
	Filing Date	October 12, 2001
	First Named Inventor	Keiko MORII et al.
	Art Unit	2655
	Examiner Name	Daniel D. Abebe
Total Number of Pages in This Submission	17	
Attorney Docket No.	MAT-8193US	

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Credit Card Payment Form Attached	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): ➤ Return postcard
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Remarks:

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT

Firm Name	RatnerPrestia		
Signature			
Printed Name	Lawrence E. Ashery		
Date	March 7, 2005	Reg. No.	34,515

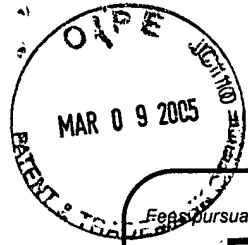
CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature			
Typed or Printed Name	Fran Petrillo	Date	March 7, 2005

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Effective on 12/08/04.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL For FY 2005

Applicant claims small entity status. See 37 CFR 1.27

Complete if Known

Application Number	09/975,918
Filing Date	October 12, 2001
First Named Inventor	Keiko MORII, et al.
Examiner Name	Daniel D. Abebe
Art Unit	2655

TOTAL AMOUNT OF PAYMENT (\$ 300.00)

Attorney Docket No. MAT-8193US

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number: 18-0350 Deposit Account Name: RatnerPrestia

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

<input type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	
Utility	300	150	500	250	200	100	—
Design	200	100	100	50	130	65	—
Plant	200	100	300	150	160	80	—
Reissue	300	150	500	250	600	300	—
Provisional	200	100	0	0	0	0	—

2. EXCESS CLAIM FEES**Fee Description**

Each claim over 20 (including Reissues)

Small Entity

Fee (\$)	Fee (\$)
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50	25
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Each independent claim over 3 (including Reissues)

200	100
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Multiple dependent claims

360	180
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Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims
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$$33 - 27 \text{ or HP} = 6 \times 50 = \$300.00$$

HP = highest number of total claims paid for, if greater than 20

Fee (\$)	Fee Paid (\$)
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Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
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$$3 - 3 \text{ or HP} = 0 \times 0 = 0$$

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
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$$- 100 = \text{_____} / 50 = \text{_____} \text{ (round up to a whole number)} \times \text{_____} = \text{_____}$$

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Fees Paid (\$)

Other (e.g., late filing surcharge): _____

SUBMITTED BY *[Signature]* Complete (if applicable)

Signature	Registration No. Attorney/Agent)	34,515	Telephone	(610) 407-0700
Name (Print/Type)	Lawrence E. Ashery		Date	March 7, 2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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2655

S.C.C.
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Appln. No.: 09/975,918
 Amendment Dated: March 7, 2005
 Reply to Office Action of: December 7, 2004

MAT-8193US



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appln. No: 09/975,918
 Applicants: Keiko MORII, et al.
 Filed: October 12, 2001
 Title: METHOD FOR SPEECH RECOGNITION, APPARATUS FOR THE
 SAME,
 AND VOICE CONTROLLER
 TC/A.U.: 2655
 Examiner: Daniel D. Abebe
 Confirmation No.: 9228
 Docket No.: MAT-8193US

AMENDMENT

Mail Stop Amendment

Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:

Responsive to the Office Action dated **December 7, 2004**, please amend the above-identified application as follows:

- Amendments to the Specification** begin on page _____ of this paper.
- Amendments to the Claims** are reflected in the listing of claims which begins on page **2** of this paper.
- Amendments to the Drawings** begin on page _____ of this paper and include an attached replacement sheet(s).
- Amendments to the Abstract** are on page _____ of this paper. A clean version of the Abstract is on page _____ of this paper.
- Remarks/Arguments** begin on page **10** of this paper.

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